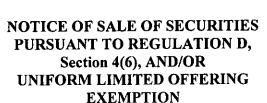
FORM D

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

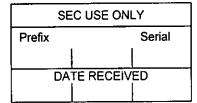
FORM D



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	OMB AF	PROVAL

3235-0076 OMB Number: April 30, 2008

Expires: Estimated average burden hours per response . . . . 16.00



1

		<del></del>							
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)									
Lumidigm, Inc Offering of Series C Preferred Stock									
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505	Rule 506	ପ୍ର Section 📢 🔲 ULOE					
Type of Filing: ☑ New Filing	☐ Amendment			RECEIVED (8)					
	A. BASIC IDE	NTIFICATION DATA	\\ DFI						
1. Enter the information requested about the			E.	21200					
Name of Issuer ( check if this is an amenda	nent and name has changed, ar	nd indicate change.)	13	100/ 1					
Lumidigm, Inc.			ि रिली र						
Address of Executive Offices	(Number and Street	, City, State, Zip Code)	Telephone Number (in	cluding (Arth Code)					
801 University Blvd SE, Ste 302, Albuq	uerque, New Mexico 8710	06	505-246-6000						
Address of Principal Business Operations	(Number and Street	, City, State, Zip Code)	Telephone Number (In	cluding Area Code)					
(if different from Executive Offices)			<u></u>						
Brief Description of Business	<del></del> -			PROCESSED					
Biometric Technology.									
Type of Business Organization				JAN 0 8 2008					
☑ corporation □	imited partnership, already for	rmed 🗆 othe	r (please specify):	> 37.11 0 0 2000					
☐ business trust ☐	imited partnership, to be form	ed		THOMSON					
	Month	Year	<u> </u>	ENANCIAL					
Actual or Estimated Date of Incorporation or C	Actual or Estimated Date of Incorporation or Organization: 04 2002 🗹 Actual 🔲 Estim								
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal CN for Canada; FN for other	Service abbreviation for er foreign jurisdiction)	State: DE						

## GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange-Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (5-05)

\\BQ - 087972/000005 - 200103 v2

### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: 2. Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ General and/or Managing Partner ☑ Executive Officer ☑ Director Check Boxes that Apply: ☐ Promoter □ Beneficial Owner Full Name (Last name first, if individual) Harbour, Robert M. Business or Residence Address (Number and Street, City, State, Zip Code) 801 University Blvd SE, Ste 302, Albuquerque, New Mexico 87106 ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner Check Boxes that Apply: ☐ Promoter ☐ Beneficial Owner Full Name (Last name first, if individual) Miller, William Business or Residence Address (Number and Street, City, State, Zip Code) 801 University Blvd SE, Ste 302, Albuquerque, New Mexico 87106 ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner Check Boxes that Apply: □ Promoter ☐ Beneficial Owner Full Name (Last name first, if individual) Rowe, Timothy Business or Residence Address (Number and Street, City, State, Zip Code) c/o CI Fund, LLC, One Broadway, 14th Floor, Cambridge, MA 02142 ☐ General and/or Managing Partner ☑ Director Check Boxes that Apply: ☐ Beneficial Owner ☐ Executive Officer ☐ Promoter Full Name (Last name first, if individual) George, Harry Business or Residence Address (Number and Street, City, State, Zip Code)

☐ Executive Officer

☑ Beneficial Owner

☑ Director

General and/or Managing Partner

6245 East Broadway Blvd., Suite 620, Tucson, AZ 85711

☐ Promoter

Business or Residence Address (Number and Street, City, State, Zip Code) 801 University Blvd SE, Ste 302, Albuquerque, New Mexico 87106

Check Boxes that Apply:

Robinson, M. Ries

Full Name (Last name first, if individual)

# A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

		<u> </u>			
Check Boxes that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Spong, Stephanie					
Business or Residence Addre	,	-			
15 West South Temple, S	uite 520, Salt Lake Cit	y, UT 84101			
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Manser, Steve					
Business or Residence Addr	ess (Number and Street, C	ity, State, Zip Code)			
801 University Blvd SE,	Ste 302, Albuquerque,	New Mexico 87106			
Check Boxes that Apply:	☐ Promoter	☑ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Rowe, Robert K.					
Business or Residence Addr	ess (Number and Street, C	ity, State, Zip Code)			
801 University Blvd SE,	Ste 302, Albuquerque,	New Mexico 87106		<u> </u>	
Check Boxes that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)		<del></del>		
Intel Capital (Cayman) C	orporation				
Business or Residence Addr	ess (Number and Street, C	City, State, Zip Code)	- '		
2200 Mission College Bl	vd., RN6-37, Santa Cla	ra, CA 95052-8119			
Check Boxes that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Solstice Capital II LP					
Business or Residence Addr	ess (Number and Street, C	City, State, Zip Code)			
6245 East Broadway Blv	d., Suite 620, Tucson, A	AZ 85711			
Check Boxes that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Wasatch Venture Fund II	I, LLC		· <del>- · ·</del>		
Business or Residence Addr	ess (Number and Street, C	City, State, Zip Code)			
15 West South Temple, S	Ste. 520, Salt Lake City	, UT 84101			
Check Boxes that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
MV I LLC.			· <del></del>	·	
Business or Residence Addr	ess (Number and Street, C	City, State, Zip Code)			
1303 E. Algonquin Road	, Sixth Floor, Schaumb	urg, IL 60196			
Check Boxes that Apply:	☐ Promoter	☑ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
New Mexico Co-Investm	ent Partners, L.P.		·		<u></u>
Business or Residence Adda	ess (Number and Street, C	City, State, Zip Code)			
15 West South Temple, S	Ste. 520, Salt Lake City	, UT 84101	<u>.</u>		

				В. Г	NFORMAT	TION ABOU	JT OFFERI	NG				
											Yes	No
1.	Has the issuer sold, o	r does the issu				nvestors in th mn 2, if filin			***************************************	************		Ø
2	What is the minimum	invectment t									\$ N/A	
2.	what is the minimum	i ilivestilient i	iai wili be ac	cepted from	n any marva	uuari				***************************************	Yes	No ·
3.	Does the offering per	mit joint own	ership of a si	ngle unit?				-,		·····	☑	
	Enter the information similar remuneration an associated person broker or dealer. If n the information for the	for solicitatio or agent of a b nore than five nat broker or d	n of purchase broker or dea (5) persons t ealer only.	ers in conne ler registere	ction with s d with the S	ales of securi SEC and/or w	ities in the of ith a state or	ffering. If a p r states, list th	erson to be lis e name of the	ted is		
Full	Name (Last name firs	t, if individua	1)									
Busi	ness or Residence Ad	dress (Numbe	r and Street,	City, State,	Zip Code)				-	<del></del>		
Nam	e of Associated Broke	er or Dealer						<u>-</u> .				
State	s in Which Person Li	sted Has Solie	ited or Inten	ds to Solicit	Purchasers	*						
	ck "All States" or che										[	☐ All States
(Che		[AZ]	[AR]	[CA]	[CO]	[CT]	IDEI	[DC]	[FL]	IGAI	(HI)	ID
(IL)	INI	[AZ]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	IMOI
[MT]		[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[NDI	(OH)	[OK]	[OR]	(PA)
[RI]	INE INE	[SD]	TN]	[TX]	[UT]	[VT]	[VA]	[VA]	(WV)	[WI]	[WY]	[PR]
	Name (Last name firs	• •										
Busi	ness or Residence Ad	dress (Numbe	r and Street,	City, State,	Zip Code)		<del></del>					
Nam	e of Associated Brok	er or Dealer				<u> </u>					_	
State	s in Which Person Li	sted Has Solid	ited or Inten	ds to Solici	t Purchasers							
(Che	ck "All States" or che	ck individual	States)						***************************************			☐ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	DE	[DC]	[FL]	[GA]	[HI]	ΙΙDΙ
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[M]]	[MN]	[MS]	IMOI
[MT	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	(PR)
Full	Name (Last name firs	st, if individua	l)									
Busi	ness or Residence Ad	dress (Numbe	r and Street,	City, State,	Zip Code)							
Nam	e of Associated Brok	er or Dealer			<del></del>							
State	s in Which Person Li	sted Has Solid	cited or Inten	ds to Solici	t Purchasers	i		. <u></u>				
(Che	ck "All States" or che	eck individual	States)		•							☐ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	(ID)
[IL]	[M]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT	j [NE]	[NV]	[NH]	[NJ]	NMI	[NY]	[NC]	[ND]	[HO]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	(WI)	[WY]	[PR]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND	USE OF PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		-
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$0	\$0
	Equity	\$0	\$0
	☐ Common Stock: Issuable upon conversion of Series C Preferred Stock (as hereinafter defined)		
	☑ Preferred Stock Series C Preferred Stock, par value \$0.001 per share ("Series C Preferred Stock")		
	Convertible Securities: 2,532,195 shares of Series C Preferred Stock issued to Purchasers at a purchase price of \$2.7644 per share. A total of 1,691,009 shares of Series C Preferred were sold at the First Closing	\$	\$ <u>4,674,625,28</u>
	Partnership Interests	\$0	\$0
	Other (Specify)	\$0	\$0
	Total	\$ 7,000,000.00	\$ 4,674,625.28
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number	Dollar Amount
		Investors	of Purchases
	Accredited Investors	10	\$ <u>4,674,625.28</u>
	Non-accredited Investors	N/A	\$ <u>N/A</u>
	Total (for filings under Rule 504 only)	N/A	\$N/A
	Answer also in Appendix, Column 4, if filing under ULOE.		<del></del>
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Tat C - Question 1.	Type of	Dollar Amount
		Security	Sold
	Type of Offering	·	
	Rule 505	N/A	\$N/A
	Regulation A	N/A_	\$N/A
	Rule 504	N/A_	\$N/A
	Total	N/A	\$N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	_ ☑	\$ \$100,000.00
	Accounting Fees		\$
	Engineering Fees		\$
			s
	Sales Commissions (specify finders' fees separately)		\$
	Finders' Fees	<u>_</u>	
	Other Expenses (Identify)		\$

\$ \_\_\_\_\$100,000.00

C. OFFERING PRICE, NUMBER OF IN	VESTORS, EXPENSES AND U	JSE OF PROCEEDS		
b. Enter the difference between the aggregate offering price gives furnished in response to Part C – Question 4.a. This difference is the	n in response to Part C - Quest "adjusted gross proceeds to the	tion I and total expen	ses \$	4,574,625.28
<ol> <li>Indicate below the amount of the adjusted gross proceeds to the issu shown. If the amount for any purpose is not known, furnish an estil total of the payments listed must equal the adjusted gross proceeds to above.</li> </ol>	mate and check the box to the	left of the estimate.	he	
		Payment to		
		Officers,		n
		Directors, & Affiliates		Payment To Others
Salaries and fees		□ \$	_0 □\$_	<u>0</u>
Purchase of real estate		□ \$		0
Purchase, rental or leasing and installation of machinery and equipment		□ \$		0
Construction or leasing of plant buildings and facilities				0
Acquisition of other businesses (including the value of securities involved		<u> </u>	<u> </u>	<u></u>
may be used in exchange for the assets or securities of another issuer purs	uant to a merger)	<b></b>	<u>0</u> 🗆 \$_	0
Repayment of indebtedness		□ \$		0
Working capital		□ \$		4,574,625.28
Other (specify):		□ \$		
Oulei (specify).		<del></del>		
		□ \$	<u>0</u> □\$_	
Column Totals		□ \$		
Total Payments Listed (column totals added)		\$	4,574,62	<u>25.28</u>
		<del></del>		<del></del>
	RAL SIGNATURE			
The issuer had duly caused this notice to be signed by the undersigned duly au constitutes an undertaking by the issuer to furnish to the U.S. Securities and E. issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502	xchange Commission, upon writt	filed under Rule 505, the request of its staff, the	ne informatio	signature on furnished by the
Issuer (Print or Type)	Signature		Date	
Lumidigm, Inc.	Mark	gar_	Dece	ember 18, 2007
Name of Signer (Print or Type)	Title of Signer (Print or Type)			
Robert M. Harbour	Chief Executive Officer			

ATTENTION
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIG	NATURE						
1.	. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?							
	See Appendix, Colur	nn 5, for state response.						
2.	The undersigned issuer hereby undertakes to furnish to the state administrate such times as required by state law.	or of any state in which the notice is filed, a notice on Form D (17	CFR 239.500) at					
3.	The undersigned issuer hereby undertakes to furnish to any state administrat	ors, upon written request, information furnished by the issuer to of	fferees.					
4.	The undersigned issuer represents that the issuer is familiar with the condition (ULOE) of the state in which this notice is filed and understands that the issuer these conditions have been satisfied.	ons that must be satisfied to be entitled to the Uniform limited Officuer claiming the availability of this exemption has the burden of es	ering Exemption stablishing that					
	e issuer has read this notification and knows the contents to be true and has dulerson.	ly caused this notice to be signed on its behalf by the undersigned	duly authorized					
Issu	uer (Print or Type) Signa	Date Date						
Lu	umidigm, Inc.	Rukarban Decemb	per 18, 2007					
Naı	ume of Signer (Print or Type)  Title	Title of Signer (Print or Type)						
Ro	obert M. Harbour Chie	f Executive Officer						

	•			APPEN	IDIX	<u>.</u>				
Î	Intend to non-a investor	I to sell accredited is in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted (Part E-Item 1)	
State	Yes	No	An Aggregate of \$7,000,000 of Series C Preferred offered to all investors in the Offering	Number of Accredited Investors	Amount Paid at Initial Closing	Number of Non-Accredited Investors	Amount	Yes	No	
AZ		X	177,020 shares of Series C Preferred	1	\$489,354.09	0	0		N/A	
CA		X	299,708 shares of Series C Preferred	2	\$828,512.80	0	0		N/A	
iL		X	373,838 shares of Series C Preferred	1	\$1,033,437.77	0	0		N/A	
MA		X	199,362 shares of Series C Preferred	1	\$551,116.31	0	0		N/A	
NM		X	51,923 shares of Series C Preferred	1	\$143,535.94	0	0		N/A	
OH		X	227,417 shares of Series C Preferred	2	\$628,671.55	0	0		N/A	
UT		Х	361,741 shares of Series C Preferred	2	\$999,996.82	0	0		N/A	

